

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.



<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/453,319-Conf. #2455
		Filing Date	December 2, 1999
		First Named Inventor	Steven Shepard
		Examiner Name	G. K. Verbitsky
		Art Unit	2859
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No. 209529-81571	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ 455.00)			

<b>METHOD OF PAYMENT</b> (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account   Deposit Account Number: <u>50-3145</u> Deposit Account Name: <u>Honigman Miller Schwartz and Cohn LLP</u>					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

<b>FEE CALCULATION</b>																			
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																			
<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>														
	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fees Paid (\$)</b>												
Utility	300	150	500	250	200	100	_____												
Design	200	100	100	50	130	65	_____												
Plant	200	100	300	150	160	80	_____												
Reissue	300	150	500	250	600	300	_____												
Provisional	200	100	0	0	0	0	_____												
<b>2. EXCESS CLAIM FEES</b>																			
<b>Fee Description</b>																			
Each claim over 20 (including Reissues) <b>Fee (\$)</b> 50 <b>Small Entity Fee (\$)</b> 25																			
Each independent claim over 3 (including Reissues) <b>Fee (\$)</b> 200 <b>Small Entity Fee (\$)</b> 100																			
Multiple dependent claims <b>Fee (\$)</b> 360 <b>Small Entity Fee (\$)</b> 180																			
<table border="0"> <tr> <td><b>Total Claims</b></td> <td><b>Extra Claims</b></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> <td><b>Multiple Dependent Claims</b></td> </tr> <tr> <td>- 20 =</td> <td>x</td> <td>=</td> <td></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> </tr> </table>								<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	- 20 =	x	=		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>															
- 20 =	x	=		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>														
<table border="0"> <tr> <td><b>Indep. Claims</b></td> <td><b>Extra Claims</b></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> <td></td> <td></td> </tr> <tr> <td>- 3 =</td> <td>x</td> <td>=</td> <td></td> <td></td> <td></td> </tr> </table>								<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			- 3 =	x	=			
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>																
- 3 =	x	=																	
<b>3. APPLICATION SIZE FEE</b>																			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																			
<table border="0"> <tr> <td><b>Total Sheets</b></td> <td><b>Extra Sheets</b></td> <td><b>Number of each additional 50 or fraction thereof</b></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> </tr> <tr> <td>- 100 =</td> <td>/50</td> <td>(round up to a whole number) x</td> <td>=</td> <td></td> </tr> </table>								<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	- 100 =	/50	(round up to a whole number) x	=			
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>															
- 100 =	/50	(round up to a whole number) x	=																
<b>4. OTHER FEE(S)</b>																			
Non-English Specification, \$130 fee (no small entity discount)																			
Other (e.g., late filing surcharge): 2251 Extension for response within first month <b>Fee (\$)</b> 60.00																			
2801 Request for continued examination (RCE) (see 37 ... <b>Fee (\$)</b> 395.00)																			

<b>SUBMITTED BY</b>					
Signature			Registration No. (Attorney/Agent)	33,373	Telephone (248) 566-8500
Name (Print/Type)	Joseph V. Coppola, Sr.		Date	February 8, 2006	

02/15/2006 MWOLGE1 0000019 503145 09453319

02 FC:2251 60.00 DA

Application No. (if known): 09/453,319

Attorney Docket No.: 209529-81571



## Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on February 8, 2006  
Date

*Joyce Krumpe*  
Signature

Joyce A. Krumpe

Typed or printed name of person signing Certificate

Registration Number, if applicable

(248) 566-8372

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)